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PTO/SB/17 (01-06)(modified)

Approved for use through 07/31/2006, OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2006</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/720,421
TOTAL AMOUNT OF PAYMENT <b>( \$ )</b> No Fee		Filing Date	November 24, 2003
		First Named Inventor	Kent et al.
		Examiner Name	Stephen G. Sherman
		Art Unit	2629
		Attorney Docket No.	ELG056-US

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account Deposit Account Number: **18-0560** Deposit Account Name: **Tyco Electronics Corporation**  
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  
 Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
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 under 37 CFR 1.16 and 1.17

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**FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Small Entity</u>
	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$) Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims Extra Claims Fee (\$) Fee Paid (\$)

Multiple Dependent Claims

Fee (\$) Fee Paid (\$)

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

\_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

\_\_\_\_\_

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

\_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x _____	_____ = _____	<u>Fees Paid (\$)</u>

**4. Other Fee(s)**

Extension fee No Extension Fee

N/A

Other: Reply to Restriction Requirement

No Fee

**SUBMITTED BY**

Signature	<i>Marguerite E. Gerstner</i>	Registration No. (Attorney/Agent)	Telephone
Name (Print/Type)	Marguerite E. Gerstner	32,695	650-361-2483

**Certificate of Mailing (37 CFR 1.8)**

I hereby certify that this paper or fee is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below:

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Signature:

*Marguerite E. Gerstner*



IFW  
PATENT APPLICATION  
ELG056-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of ) Group Art Unit: 2629  
KENT ET AL. )  
Application No. 10/720,421 ) Examiner: Stephen G. Sherman  
Filed: November 24, 2003 )  
For: TOUCH SENSOR WITH CONDUCTIVE ) TYCO ELECTRONICS CORPORATION  
POLYMER SWITCHES ) 307 Constitution Drive  
 ) Menlo Park, CA 94025  
 ) July 26, 2006  
 )

REPLY TO RESTRICTION REQUIREMENT

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This paper is filed in reply to the Office Action mailed June 28, 2006. Please charge any necessary fees or credit any overpayments to Deposit Account No. 18-0560. Reconsideration, re-examination, and allowance are respectfully requested in view of the Remarks below.

Amendments to the Claims are reflected in the listing of claims which begins on page 2. Remarks begin on page 7.

CERTIFICATE OF MAILING UNDER 37 CFR §1.8

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Name of person signing certificate: Marguerite E. Gerstner  
Signature: Marguerite E. Gerstner Date: July 26, 2006